PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003							10/8/072						
_	CLAIMS AS FILED - PART (Column 1)				•	lumn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
	TOTAL CLAIMS 17						RA	TE	FEE		RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		FEE	385.0	OR	BASIC FE		
Ţ	OTAL CHARG	EABLE CLAIMS	17 m	17 minus 20=			xs	9=		OR	X\$18=		
INDEPENDENT CLAIMS				minus 3 =			X4:	3=		OR	Vec	1	
MULTIPLE DEPENDENT CLAIM PRESENT							+14	5= ·		OR			
* If the difference in column 1 is less than zero, enter "0" in column 2						ТОТ		385	OR	TOTAL	ļ.		
	CLAIMS AS AMENDED - PART II								. 283			THAN	
-	(Column 1) (Column 2) (Column 3)						SMA	LL E	NTITY	OR	SMALL	ENTITY	
ENT A	-	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	*	Minus			=	X\$ 9	=		OR	X\$18=		
	Independent	ENTATION OF M	Minus	***	<u> </u>	=	· X43	-		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				CLAIM		+145	_		OR	+290=		
	'/							AL EE		OR	TOTAL		
(Column 1) (Column 2) (Column 3)											ADDIT. FEE		
AENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA	RATE	•	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=	X\$ 9:			OR	X\$18=		
	Independent	*	Minus	***	21 0104	=	X43=			OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								r	OR	+290=		
							TOT.			OR A	TOTAL DDIT, FEE		
	(Column 1) (Column 2) (Column 3)									· .		·	
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	RATE	TI	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=	X43=	T		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=	1		OR -	+290=		
11	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2 octor "20."								∸	_ _	TOTAL DIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE Is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													